PTO/SB/82 (01-06)

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Application Number	10/652,745	
Filing Date	08-29-2003	
First Named Inventor	C. Schasteen et al.	
Art Unit	1617	
Examiner Name	S. Kantamneni	
Attorney Docket Number	048968-117961	

I hereby revoke all previous powers of attorney given in the above-identified application.		
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
SIGNATURE of Applicant or Assignee of Record		
Signature / //////////		
Name Jennifer Wa	gner, Staff Attorney	
Date	10(10(07) Telephone 314-576-8886	
NOTE: Signatures of all the inventors or assignities of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		

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